

DENTAL & SURGICAL INSTRUMENT SHARPENING SERVICE

WHEN QUALITY COUNTS... EXPERIENCE MATTERS

Please print and fill out this form with amounts & include it in your package

Elevator/Luxator_\$8	Periosteal Elevator_\$8	Root <u>Pick_</u> \$5	Suture Scissor \$6
Hand Scaler_\$6	Hand Curette_\$6	Needle Holder_\$6	Deciduous Elevator_\$8
<u>Scissor \$6 - \$7</u>	Other		* \$15.00 Machine set up fee
	FAST TU	RN-AROUND TIME	<u>E</u>
Usually only a	few day turnaround tim	ne. Loaner instrumm	nents available upon request
Please chec	k website before mai	lling, I will post da	tes if I will be out of town
	MAILIN	ISTRUMENTS TO:	
	PRECISION INST		
101 F.	PARK AVE. SUITE		
101 =.			
		NG INSTRUCTION	
DO NOT SEN	<u>ID THROUGH UPS</u>	<u>, They won't del</u>	<u>liver to a Post Office! :-(</u>
padding so they c	do not <u>"Jingle"</u> in the box. Do Email <u>info@pisharpening.</u> uments will be sent back Prior	o not send cases or instruction on the com w/ Tracking numbe rity Mail Flat Rate box wh	hich <u>includes \$100 insurance</u>
*If higher o	dollar amount of insurance is	, wanted, please write am	nount here \$
Payment du			mediately after sharpening
	Payment can be made wit	h a credit card through t	he invoice link
Name		D;	ate
Clinic Name			
Clinic Street Address	s		
City		State	Zip Code
Phone Number	Bill	ing Email	
Signature			
*Client agrees not to h	hold Precision Instrument Shar	pening liable for any loss	or damages
	SAVE MONE	Y WITH MAINTENA	ANCE!
HELMANIELI	T 10% OFF IF YOU HAVE US eck here if these are the same i		

www.pisharpening.com info@pisharpening.com 602-499-0870